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CONTINENT URINARY DIVERSION IN PATIENTS WITH PELVIC IRRADIATION: AN ALTERNATIVE UTILIZING TRANSVERSE COLON RESERVOIR

Synopsis of Video

The use of radiation therapy in pelvic malignancies increases the risk of urinary complications, sometimes being necessary urinary diversion. The risk of utilizing previously irradiated bowel should be avoided. The use of transverse colon is a safe and effective alternative.

We present a heterotopic continent colonic reservoir with an easily catheterizable conduit, where the transverse colon is detubularized and configured in a spherical shape. The catheterizable conduit is performed also with a 2-cm segment of the transverse colon, detubularized and reconfigured in the same manner as described by Monti for the small bowel, obtaining a 10-cm long conduit (Figure). For continence, a serous line valve is performed, covering 4cm of the conduit. The other extremity of the conduit is sutured to the skin using a 'Z' flap to avoid stricture.

This technique allows the use of a smaller segment of colon, providing a long, easily catheterizable and continent conduit.

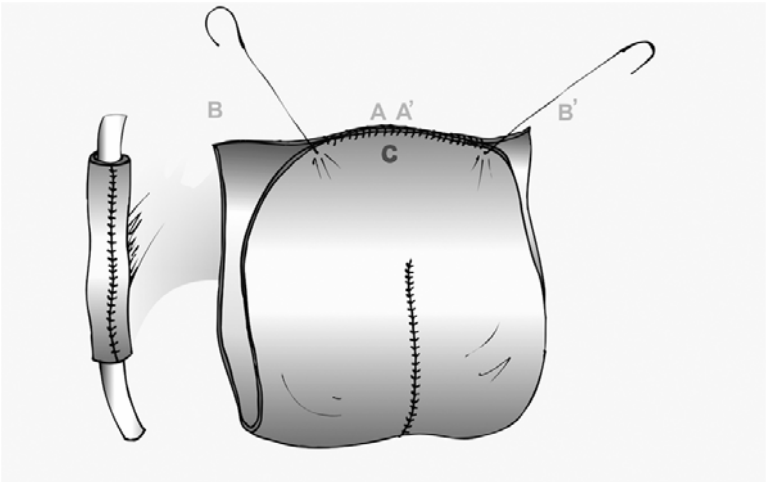

Figure: Reservoir of transverse colon and catheterizable conduit.